

APPLICATION

April 6 - June 1, 2018

(Please complete and submit as a WORD document)

Name:	
Your title/position with office:	
Office name and address:	
Your e-mail address:	
Supervisor's name and e-mail:	
Your phone #s (office, cell, fax)	
This completed application must be submitted electronically to the Arizona Forensic Science Academy Board at ForSci@azag.gov no later than March 19, 2018, 5:00 p.m. You may attach one page of additional information to supplement this application. All applicants must agree to attend a minimum of 80% of the academy sessions as attendance and active participation are critical to the successful completion of this course. You will receive electronic notification of our decision on your application by March 27, 2018.	
Number of years of legal experience in all states	
Briefly list your legal employment history with dates and positions held	
Describe the types of cases in your current caseload and any previous experience with a specialty caseload	
Describe your felony trial experience and involvement with forensic issues	
Summarize what you hope to gain from attending and how you plan to use this training in the future.	
Explain the flexibility in your schedule to attend eight weekly courses.	
Why do you want to attend this training?	
Will you be attending?	☐ In-person ☐ Virtual Academy (Webinar is only available for those residing outside of Maricopa County.)

☐ By checking this box, you are acknowledging your commitment to attending a minimum of 80% of the Academy sessions and actively participating in course activities.